Short Communication Open Access

Testing and Treatment for Feeding and Swallowing Disorders in Children

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Think approximately the way you consume. First, you need to get the meals or drink in your mouth. You can also additionally use a fork, spoon, straw, cup, or your hands. Then you need to open your mouth and take the meals in. You near your lips to hold the meals on your mouth. Then you bite the meals or pass the liquid to get equipped to swallow. From birth, babies consume through sucking. As they grow, they discover ways to consume strong ingredients and drink from a cup. All kids could have a few hassle at first. Drinks can also additionally spill from their mouths. They can also additionally push meals lower back out or gag on new ingredients. Some diploma of this conduct is ordinary and need to leave over time. However, a toddler with a feeding disease will hold having hassle or can also additionally have an specifically difficult time consuming or drinking. Some kids will consume best sure ingredients, or they'll take a long term to consume. These kids may additionally have a feeding disease. If your toddler coughs or chokes whilst consuming, refuses meals or liquid, has a wet, gurgly voice after consuming, begins off evolved to lose weight, or has much less electricity than usual, speak in your physician approximately seeing a feeding and swallowing professional [1].

Swallowing takes place in 3 stages. A toddler could have a hassle in a single or extra of those stages. They encompass:

- Oral phase-sucking, chewing, and transferring meals or liquid into the throat. Feeding is part of the oral phase.
- Pharyngeal phase-beginning the swallow and squeezing meals down the throat. The frame desires to shut off their airway to hold meals or liquid out. Food going into the airway can reason coughing and choking.
- Esophageal phase-beginning and last the esophagus (the tube that is going from the mouth to the stomach). The esophagus squeezes meals right all the way down to the stomach. Food can get caught with inside the esophagus. Or a toddler can also additionally throw up loads if there may be a hassle with the esophagus [2].

Testing

Talk in your toddler's physician in case you assume they've a feeding or swallowing hassle. Your physician can check your toddler for scientific troubles and take a look at their increase and weight. An SLP skilled in feeding and swallowing can study how your toddler eats and beverages [3]. The SLP can watch how your toddler swallows the usage of methods: The SLP will take the subsequent steps:

- Ask questions on your toddler's scientific history, development, and the troubles they may be having
 - Watch how your toddler actions their mouth and tongue
- Watch your toddler consume to peer how they choose up meals, bite, swallow, and drink
 - Watch how your toddler behaves at some point of meals
 - Do unique tests, if needed

The SLP can watch how your toddler swallows the usage of methods:

• Modified barium swallow study-Your toddler eats or

beverages meals or liquid with barium in it. Barium indicates up on an x-ray so the SLP can watch wherein the meals is going [4].

• Endoscopic assessment-The physician or SLP places a tube with a mild at the cease of it into your toddler's nostril. This scope has a digital digicam on it, and the SLP can watch your toddler swallow on a screen.

The crew will advise approaches to enhance your toddler`s feeding and swallowing.

Treatment

The SLP or feeding crew can also additionally advise a number of those subsequent steps:

- Referral to a physician for scientific remedy, like drug treatments for reflux
 - Feeding therapy
 - Attempting exclusive ingredients or including energy to their diet
- Attempting new approaches to get your toddler to strive new ingredients or textures
- Converting how warm or bloodless meals is or how crunchy or gentle it is
 - Converting your toddler's role even as consuming

In intense cases, your toddler can also additionally want to get nutrients in different approaches. These approaches can also additionally encompass a tube inserted via their nostril or into their stomach [5].

Your toddler can also additionally want feeding or swallowing remedy with an SLP. The SLP may match on lots of tasks:

- Making the muscle groups in their mouth stronger.
- Helping them pass their tongue extra.
- Helping them bite ingredients.
- Getting them to strive new ingredients and beverages.
- Improving how nicely they are able to suck from a bottle or drink from a cup.
- Helping them discover ways to breathe even as sucking and swallowing. This might be for infants best.

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- \bullet $\,$ $\,$ Changing meals textures and liquid thickness to assist them swallow safely.
- Getting them to take part at some point of meals, along with accepting meals.

References

- Patel MR, Piazza CC, Martinez CJ, Volkert VM, Christine MS (2002) An evaluation of two differential reinforcement procedures with escape extinction to treat food refusal. J Appl Behav Anal 35: 363-374.
- 2. Bernard-Bonnin AC (2006) Feeding problems of infants and toddlers. Can Fam Physician 52: 1247-1251.
- Davies WH, Satter E, Berlin KS (2006) Reconceptualizing feeding and feeding disorders in interpersonal context: the case for a relational disorder. J Fam Psychol 20: 409-417.
- Poppert KM, Patton SR, Borner KB (2015) Systematic review: mealtime behavior measures used in pediatric chronic illness populations. J Pediatr Psychol 40: 475-486.
- Silverman AH, Tarbell S, Roberts MC, Steele RG (2009) Pediatric feeding problems, under nutrition, and vomiting disorders. Handbook of Pediatr Psychol 40: 429-445.

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